Rev. 06/2006

State Be

State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

LOBBYIST MONTHLY REP	ORT	FORM
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To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page	of	Page(s)
THIS	SPACE FOR	OFFICE USE ONLY

06 SEP 11 PM 4:49 (Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared 9-11-06 (Day) (Yr.) (Mo.) Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers Employer No. 4 Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services Total *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. Item The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. Names of Legislators, Public and Executive Officials in Group Amount Place Date Continued on attached page(s) Employer(s) Name(s) and Address(es) INSTRUCTIONS I dano Trial Lawyers Assn. PO 1777 Boise 85701 Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within ten (10) days of the No. 2 month for activities of the past month. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4

Item 4	person	al prop	litures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible all property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.						
	Date Amount Name of					of Legislator, Public or Executive Official Receiving or Benefiting			
Item 5	or Hou	se Bill,		on, the number of the Senate legislative activity in which posing.	Code	LEGISLATIVE SUE		IDENTIFICATION Subject	
Subject	Code	Bill, Re	esolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs	
(from			ive Ident. Number	and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigus, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal	18 19 20 21 22 23 24 25 26 27 28 29 30	Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads	
Item dentify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.			· · · · · · · · · · · · · · · · · · ·	CERTIFICATION: I hereby certificorrect statement in accordance v					
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